

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new non-provisional applications under 37CFR§1.53(b))	Attorney Docket No.	KLR 7146.0164
	First Inventor or Application Identifier	A. Mufit Ferman
	Title	RED EYE REDUCTION TECHNIQUE
	Express Mail Label No.	EL 915420370 US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissioner for Patents & Trademarks P.O. Box 1450 Alexandria, VA 22313
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1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification <span style="float: right;">Total pages <b>17</b></span> (preferred arrangement set forth below) - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Federally Sponsored Research - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer readable copy b. <input type="checkbox"/> Paper copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <span style="float: right;">[Total Pages <b>6</b>]</span>	<b>ACCOMPANYING APPLICATION PARTS</b> 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 CFR §3.73(b) Statement <input type="checkbox"/> Power of Attorney when there is an assignee 9. <input type="checkbox"/> English translation document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO 1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized) 13. <input type="checkbox"/> *Small Entity Statements (PTO/sb/09-12) <input type="checkbox"/> Statement filed in prior application. Status still proper and desired. 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other
4. Oath or Declaration <span style="float: right;">[Total Pages <b>2</b>]</span> a. <input checked="" type="checkbox"/> Newly executed (unsigned) b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.53(d)(2) and 1.33(b)	
* Note for Items 1 & 13: In order to be entitled to pay small entity fees, a small entity statement is required (37 CFR §1.27) except if one filed in a prior application is relied upon (37 CFR §1.28)	

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment

Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group No./Art Unit \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label		(Insert customer number or attach bar code label here)		or <input checked="" type="checkbox"/> Correspondence address below	
Name	Kevin L. Russell				
Address	601 SW Second Ave., Suite 1600				
City	Portland	State	OR	Zip Code	97204-3157
Country	USA	Telephone	(503)227-5631	FAX	(503)228-4373
Name (print type)	Kevin L. Russell			Registration No.	38,292
Signature				Date	September 30, 2003

22386 U.S. PTO  
10/676277

093003

# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Complete If Known

Application Number  
Filing Date concurrently herewith  
First Named Inventor A. Mufit Ferman  
Examiner Name N/A  
Art Unit N / A  
Attorney Docket No. 7146.0164

☐ Applicant claims small entity status. See

TOTAL AMOUNT OF PAYMENT \$1,110

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number 03-1550

Deposit Account Name Chernoff Vilhauer McClung & Stenzel

The Commissioner is authorized to: (check all that apply)

☐ Charge fees indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Code (\$)	Code (\$)		
1001 750	2001 375	Utility filing fee	750
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			\$750

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
26	-20** = 6	x 18 =	108
Indep. Claims 6	-3** = 3	x 84 =	252
Multiple Dependent			0

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1202 18	2202 9	Claims in excess of 20	
1201 84	2201 42	Independent claims in excess of 3	
1203 280	2203 140	Multiple dependent claim, if not paid	
1204 84	2204 42	**Reissue independent claims over original patent	
1205 18	2205 9	*Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			\$360

\*\*or number of previously paid, if greater. For reissues, see above.

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge-late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex-parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1840*	1805 1840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt.	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 C.F.R. 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$0

## SUBMITTED BY

Complete (if applicable)

Name (print type) Kevin L. Russell Registration No. 38,292 Telephone (503) 227-5631

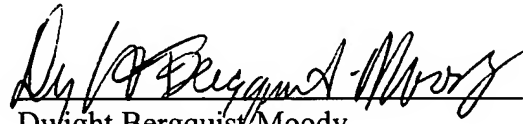
Signature Date September 30, 2003

**CERTIFICATE OF MAILING  
BY EXPRESS MAIL**

Express Mail No.: EL 915420370 US

Date of Deposit: September 30, 2003

I hereby certify that the patent application attached hereto entitled RED EYE REDUCTION TECHNIQUE, A. Mufit Ferman., inventors, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and is addressed to: MAIL STOP PATENT APPLICATION, The Honorable Commissioner for Patents, P.O. BOX 1450, Alexandria, VA 22313-1450.

  
Dwight Bergquist-Moody